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	INFORMATION DISCLOSURE	ROPE	Application Number	10/814,522
	STATEMENT BY APPLICANTN 1 2	3006	Filing Date	March 31, 2004
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		U.S. Patent	Documents	
xaminer Initials	U.S. Patent Document Number	Nam	e of Patentee or Applicant of Cited Document	Date of Publication of Cited Document
DF	6,000,642	Morey		12/14/1999
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FOREIGN PATENT DOCUMENTS								
Examiner Initials	Country Code	Foreign Patent Document Number	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document	Translation	English Abstract		
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OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS					
Examiner Initials		Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, pages(s), volume-issue numbers(s), publisher, city and/or country where published.			
		ELLIOTTE RUST HAROLD and W. SCOTT MEANS, XML In a Nutsheet, A Desktop Quick Reference;			
		O'Reilly; January 2001; O'Reilly & Associates, Inc., Sebastopl, California, U.S.A.			
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		U.S. Paten	t Documents	
Examiner Initials	U.S. Patent Document Number	Nan	e of Patentee or Applicant of Cited Document	Date of Publication of Cited Document
DF	6,006,242	Poole, et al.		12/21/1999
DF	2003/0163809	Bantz, et al.		8/28/2003
		-:		

	FOREIGN PATENT DOCUMENTS							
Examiner Initials	Country Code	Foreign Patent Document Number	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document	Translation	English Abstract		
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	OTHER PRIOR ART - NON PATENT LITERATURE DOCUMENTS
Examiner Initials	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, pages(s), volume-issue numbers(s), publisher, city and/or country where published.
DF	ARTA Deposit Documentation System Accessible Technology Meets Sensible Compliance Help, 2/1/2001, pp. 1-6, Bankers Systems, Inc., St. Cloud, MN
	ARTA Lending Documentation System Experience Proven Technology With Reliable Compliance Help, 5/1/2001, pp. 1-6, Bankers Systems, Inc., St. Cloud, MN
	ARTA Deposit Documentation System User's Guide Part 1 Version 2.5, 9/1/2002, pp. 1-63, Bankers Systems, Inc., St. Cloud, MN
	ARTA Deposit Documentation System User's Guide Part II Version 2.5, 9/1/2002, pp. 1-74, Bankers Systems, Inc., St. Cloud, MN
	ARTA Lending Documentation System Credit Insurance Setup Worksheets Credit Life Insurance, Disability Insurance, and Involuntary Unemployment Insurance, 1/6/2003, pp. 1-14, Bankers System, Inc., St. Cloud, MN
	Rembrandt Lending System Powerful Technology Fused With Reliable Compliance Knowledge, 6/5/2003, pp. 1-6, Bankers Systems, Inc., St. Cloud, MN
	I-32 Forms Solutions, I-32 Forms Design: Features, 2003, pp. 1-2, VMP Mortgage Solutions, a Bankers Systems, Inc. company
\downarrow	I-32 Forms Solutions, I-32 Forms Solutions: I-32 Featuring Editor, 2003, pp. 1-4, VMP Mortgage Solutions, a Bankers Systems, Inc. company

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